

Edward Hines Jr. VA Hospital

HINES HERO

Serving with Pride

June/July 2014

Official Newsletter of the Edward Hines Jr. VA Hospital

Vol. 1, Issue 6



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The Hero

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The Hero is the official newsletter of the Edward Hines Jr. VA Hospital, published monthly for staff, Veterans, families and volunteers.
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COMMENTARY

From a VA Physician: My Hidden VA List



I knew the call was coming, and I knew when I saw the number what the voice at the other end would tell me. My oldest patient had died quietly at home that day, a week after his birthday and exactly that long after deciding that he was done, forever, with hemodialysis. It provided him with many good years, but as he entered his mid-90s, life had become increasingly difficult. He knew, and I knew, it was time to say good-bye.

A few days later, I attended the funeral of this man — undoubtedly among the last few veterans of World War II that I will see as a physician. I have been working at Veterans' Affairs (VA) hospitals since my student days. At that time, the wards were crowded with survivors of the Pacific theater, the battles of Normandy and North Africa, the places and times I had previously known only from history lessons.

The first patient I was assigned as a third-year clerk on the medical ward at the West Haven, Connecticut, VA Hospital was one of those men. Bluish and breathing with difficulty owing to chronic lung disease, he was silent as my third attempt at an arterial blood draw failed. I withdrew my needle, apologizing profusely, and backed out of the room in shame.

"Doc, just where do you think you're going?" he called after me. It was no use explaining that I had barely been on the wards before — "doc" it was. I told him, in barely a whisper, that I'd just go find someone else to draw a blood sample.

"No chance of that, doc. Not while I have another arm," he said, rolling up his sleeve. A survivor of the D-Day landings, he had seen horrors much worse than a 25-year-old medical student carrying a blood-gas kit. I hit the artery, and he shook my hand with great satisfaction.

Now, these men of the "greatest generation" are a dwindling presence, their stories growing more precious as their numbers shrink.

My patient's memorial service was joyful, full of friends, laughter, and reflections on a lifetime of adventures. I saw the arc of a full life, my patient's trajectory from a strikingly handsome young pilot to a rugged horseback rider to the man I had known — a man whose life, despite diminishing physical health, was a powerful force to the end. I drove home alone, along the desert roads of San Diego's East County. And I began to think about the other patients I had lost.

In the Computerized Patient Record System at the VA hospital in San Diego — the same system I used as a medical student in Connecticut and the same one VA doctors use in Phoenix and everywhere else in the country — any clinician can keep a "personal list" of patients: one list for the clinic, one for the inpatient unit, and so forth. On my list, I keep the names of all my patients in the dialysis unit, alive or dead. I add new

names when someone new arrives, but I can't make myself remove the other names from the list.

The patients who are no longer with me are my hidden VA list, the reckoning sheet by which I evaluate my work. My hidden list reminds me of some of my most difficult days as a doctor. It reminds me that shortness of breath can be a sign of acute myocardial infarction, that renal-cell cancer can recur years after the initial diagnosis, that men can get invasive breast cancer. Sometimes, I feel, I may sink under the weight of these names. As time passes, though, the weight of the list balances me. It prevents me from being too sure of anything, yet it also keeps me from hesitating to trust my instincts.

My hidden list reminds me of some of the best we can offer, of patients whose lives were lived to the fullest — and were made better by VA care. Patients for whom death was not painful or frightening or unexpected, but simply the inevitable end of a story well told. Many of these patients, I am convinced, would not have lived as long or as well without the safety net of VA care.

My hidden list is full of stories, and it's a treasure trove of history. For me and for many of my colleagues, work at the VA takes on greater significance with each passing year. In my professional lifetime, we will mark the passing of the last World War II veteran. The stories of frigid nights in North Korea will become fewer, until they, too, are silenced. The tumult and chaos of Vietnam will grow still. Scars visible and invisible may all heal with the passage of time, but they will remain in memory on my hidden list.

I have little doubt that my first VA patient is dead now, along with many others I met as a trainee. I wish I could tell him how much he gave me when he held out that second arm.

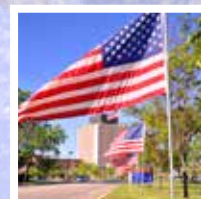
Nowhere else than at the VA have I felt as much that I was a part of something greater than myself. We "care for him who shall have borne the battle" in a system that, for all its woes, remains a singular presence in the confused patchwork of medical care that is American medicine. Enter the VA medical system and you know that your critical medical data are available to every provider at every VA hospital in the country in ways unimaginable in the private sector; you know that care delivered in the VA system often meets or exceeds the quality standards of the private sector. You know, moreover, that you and the person sitting next to you in the waiting room will get the same level of care, because there is no mysterious and fickle insurer to reckon with at the end of the appointment.

I don't know what happened in Phoenix or elsewhere, what those hidden lists hold, what grief lies there. I wish those reporting on this scandal would do more to separate issues of access to care from problems with the quality of care. I do know that, all around the country, physicians who trained at the VA or who have chosen to live out their medical career with the VA have their own hidden lists, their indelible memories of men and women who entrusted their care to us. Let us continue to work for them.

Dena Rifkin, M.D.
Nephrologist
San Diego VAMC

On the cover:

Edward Hines, Jr. VA Hospital proudly displays a row of American Flags at the entrance of the Hines campus in observance of Flag Day. (Photo by Dan DuVerney, Hines Media Service)



Hines Home of Future Homeless Vets Residence

By Charity Hardison
Hines VAH Public Affairs

Edward Hines, Jr. VA Hospital will be the home of the new Freedom's Path housing facility for homeless and disabled Veterans.

This new residential project will consist of 72-bed private residences with numerous amenities to enhance and extend independence and quality of life for Veterans.

"We are proud to be the site of the new Freedom's Path housing facility," said Joan Ricard, Hines VA Hospital Director. "This project will greatly enhance the resources available to our homeless Veterans."

The project will include supportive services provided through VA and through third party non-profit and governmental entities designed to promote self-sufficiency and independent living.

Construction is expected to be complete in the summer of 2015.



Rendition courtesy of Freedom's Path

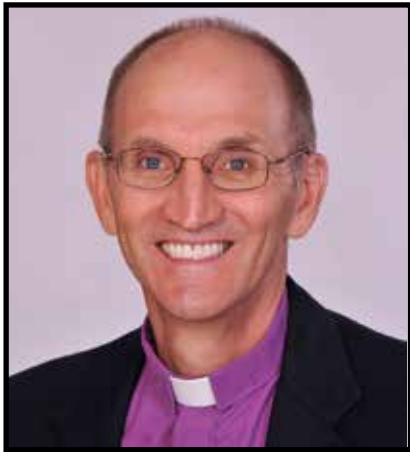


Freedom's Path stakeholders "dig in" during the groundbreaking ceremony for the Freedom's Path housing facility for homeless and disabled Veterans. (Photo by Dan DuVerney)

Coming Soon!

New Service Chief

Rev. Lynn Hanson
Chief,
Chaplain Service



Rev. Lynn Hanson was appointed Chief of Chaplain Service here at Hines, effective June 1.

Hines Vets Show Their Moves in Ballroom Dancing Competition

By Mitra Gobin, Music Therapist
Hines VAH Recreation Therapy

Eleven Hines Veterans demonstrated their dancing skills by performing at the Fred Astaire Chicago Open Competition at Pheasant Run in St. Charles, Ill. on June 21.

These Veterans worked very hard over the previous three months with Hines Recreation Therapy staff and instructors from the Fred Astaire Dance Studios to perfect their steps to the Merengue and Samba. Veterans received a standing ovation for their performance. These Veterans are

part of the Recreation Therapy Outpatient Dance Instruction Program.

Volunteer dance instructors from the Chicago Fred Astaire Dance Studios provide dance instruction each month to Veterans enrolled in the Outpatient Program and Veterans at the Hines Blind Rehabilitation Center. Way to go Hines Veterans!

For information about the Outpatient Recreation Therapy Program at Hines, please call 708-202-3631. A consult is required from the Veteran's medical provider at Hines to participate in Outpatient Recreation Therapy.



Brain's 'Error Messages' May Hold PTSD Clue

By John Crawford
VA Research Communications

To err is human. Every day people forget to lock their door, pay a bill, or yield at a stop light. Like it or not, mistakes are part of life. Now VA researchers are looking at how Veterans with posttraumatic stress disorder react to their own mistakes. The results could reveal clues as to why some Veterans are more resilient to traumatic events than others.

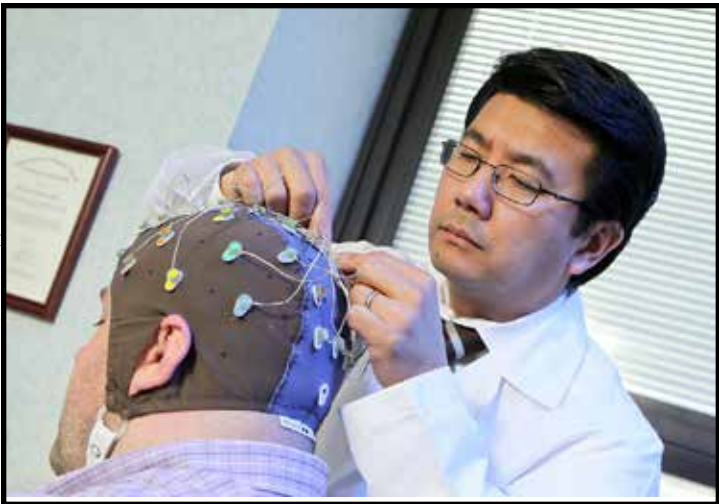
The science of error-related negativity (ERN) is one way to study electrical activity in the brain. It works like this: When someone makes a mistake, the brain releases an electrocortical response. Think of the old science fiction movies where test subjects are shocked for answering incorrectly. The brain works in something of the same way, delivering a negative electrical signal whenever an error is made.

"Every time we make an error, our brain consciously or unconsciously recognizes it and lets us know," says Dr. K. Luan Phan, a professor at the University of Illinois,

Chicago, and chief of neuropsychiatric research at the Jesse Brown VA Medical Center. "It's a neural signal so that we don't keep making the same error in the Different patterns seen in anxiety, depression

Researchers suspect that higher intensities of ERN are tied to anxiety disorders, while lower intensities have been identified in people with depression.

"We've known for about 20 years that ERN is elevated in people with obsessive compulsive disorders and that adds to their sense that something isn't right, so they may check the doorknob repeatedly to ensure they locked it," says Phan. "And in the last five years we've found increasing



Dr. K. Luan Phan adjusts a volunteer's electrode cap. He is studying the brain's "error alert" system. (Photo by Jerry Daliege)

evidence tying ERN to a number of anxiety disorders. Until recently though, no one had studied how ERN interacted with traumatic experience and PTSD."

On the surface, it seemed to make sense. PTSD is characterized by sustained anxiety and hypervigilance. Phan suspect-

SEE "BRAIN" ON PAGE 14

Congratulations!

**Years of Service
Recognition
for
Federal
Employees**

10 Years

ACOSTA, AYDE - SURGERY
ADAMS, LOIS G. - MEDICINE
ADAMS, YVETTE - SPINAL CORD
ADER, JOSEPH M. - MENTAL HEALTH
AHANOB, JULIETTE E. - NURSING
AUGUSTHY, LATHA D. - SURGERY
BADE, AIMEE LYNN - NURSING
BAILEY, KEEVA A - LT & EXT CARE
BANIQUED, ANNA MAE - SCI
BERRY-EDWARDS, TONYA - PAS
BOND, ELIZABETH A - PCS SURG/PSYCH
BONJOUR, REBECCA - REHAB
BOYD, DOUGLAS B. - FMS
BOYD, JR., GENE A - NUTRTN & FOOD
BUYCKS, SELMA S - CHIEF OF STAFF
CAMPBELL, STEPHEN P - HR
CARDEN, DAVID MICHAEL - PBM
CAUILAN, GINA B - PCS MEDICINE
CLARK, CHRISTINE A - PHARMACY
CWIKLA, JOANNA - IMAGING
DEAR, DEBORAH - SURGERY
DELBRIDGE, CHRISTINA L - REHAB
DILLARD, MONIQUE J - LT & EXT CARE
DUFFIELD, CHOWPAK G - FISCAL
DURAN, ANTHONY J. - FMS
DURAN, MARTHA - PHARMACY
FERNANDEZ, MARGARET - SURGERY
FIELDS, GABRIELLA H - SCI
FORONDA, THELMA M - LT & EXT CARE
FRANKOWICZ, THOMAS J. - PBM
GANCH, DAVID C. - SURGERY
HALBERT JR, HOWARD E - LOGISTICS
HAWKINS, GLENN - EMS
HENDERSON, CAROL ANNE - SCI
HENDRICK, DONALD - EMS
HOLMES, LAVITA M. - SURGERY
IQBAL, ZEBA - SCI
ITTIEWONE, REGINALD - EMS
JANKUNIENE, JOLANTA - IMAGING
JANUSAUSKAS, SAMUEL R - REHAB

JARA, EMMA - NURSING
JOHNSON, CHANDA L - INFORMATICS
JOHNSON, EDMOND - HR
JONES, KAREN A. - NURSING
JONES, KATIE M - LT & EXT CARE
JONES, RODNEY - EMS
KADANOFF, RUTH D. - MEDICINE
KALDIS, LIANNA - IMAGING
KALKOFEN-JACOBSEN, JILL C - VOLUNTARY
KENNY, MARY - NURSING
KNAUFF, SUSAN - REHAB
KOGUT, BEATA I - IMAGING
KOK, LINDA S - RESEARCH
KONG, JOHN - CANTEEN
LEININGER, COLLEEN J - REHAB
LOMIBAO, GLORIA R - LT & EXT CARE
LONGO, LISA S. - PBM
MAGHANOV, NENITA C - PCS SURG/PSYCH
MAGNIFICO, MAUREEN - LOGISTICS
MALEJANA, EVELYN M - PCS SURG/PSYCH
MARKS, CHIFFON G - FISCAL
MASON, DANIEL W - PAS
MATHEW, SHAJU P - MEDICINE
MCDOWELL, II, ROBERT M - PAS
MILLER, GEORGE STEPHEN - PCS MEDICINE
MORDICAN, EVONE - PAS
MORIE, ARTHUR W - EMS
MORRISON, BRANDY - NURSING
MOSSO, MAUREEN C - PCS SURG/PSYCH
OATMAN, TANESHA - EMS
OLMEDA, FRANCISCO - NURSING
PADILLA, MARY ANN - MEDICINE
PAGULAYAN, ERICH A. - NURSING
PATEL, SUDHA JUGAL - PHARMACY
PATEL, URSULA - PHARMACY
PELCHA, BRADLEY C - FMS
POGGENSEE, LINDA E - RESEARCH
RAVAL, CHIRAG - MENTAL HEALTH
RICHMOND, ROBERT LEE - FMS
RIVERA, JOSE JUAN - SURGERY
ROAN, SHIRLYNNE - NURSING
ROBLEZA, MARIA G - PCS MEDICINE
RODNEY, GARFIELD G - LT & EXT CARE
SANDERS, GENEVA - EMS
SANTANIELLO, JOHN M.- SURGERY
SCHWARTZ, KRISTINE - NURSING
SEMLA, TODD PAUL - PBM
SHARMA, NARINDER - PHARMACY
SIPPLE, JAMES R. - CANTEEN
SPROAT, ANN J - MEDICINE
STENNIS, TERRITA - LOGISTICS
STEWART, EDWARD - EMS
STRONG-ROSSI, LATANYA - NUTRTN & FOOD
THOMAS, JACQUELINE - NUTRTN & FOOD
TOMASZEK, JOSEPH - RESEARCH

VARGHESE, MARIAMMA O - SCI
VARUGHESE, SOSAMMA - PCS MEDICINE
VERASFORZZA, JANA - REHAB
WAHL, KERI L. - SURGERY
WATSON, MARCIA - NURSING
WESTERHOFF, MARK - SCI
WHITELOCK, ROBERT - MEDICINE
WILLIAMS, DESNEIGE M - LT & EXT CARE
WILLIAMS, RUFUS J - EMS
WILLIAMS, TERRY - PAS
ZACHARIAH, JAYAMOL B - PCS MEDICINE
ZAJAC, DEBORAH - PAS

15 Years

AKTHER, ASMA - NURSING
BURK, MURIEL L. - PBM
CAINES, ELEANOR - NURSING
CATALANELLO, PATRICIA A. - SURGERY
CHERRY, RONALD D - A & M MGT
CHIARAMONTE, PHILIP J - REHAB
CUNNINGHAM, FRANCESCA E - PBM
DECEAULT, TERESA - SURGERY
DOVEL, MICHAEL E - REG COUNSEL
DRUMGOLE, VIRGIL - REHAB
DUBINA, CHERLYN M - HR
FORTE, AMANDA L. - MEDICINE
GARZA, EMILY H - REHAB
GLASGOW, ALLEN M - EMS
JANUS, RUTH M. - NURSING
KOTTAPALLI, MADHAVI L - MEDICINE
LAIRD, DARRYL B. - PAS
MAYER, TODD - MENTAL HEALTH
MENDOZA, ARACELI - NURSING
MILLER, JANICE L - LT & EXT CARE
MITCHELL, CYRUS B - PAS
MUCKSAVAGE, JENNIFER R - PHARMACY
OBROCHTA, JEANNE - MENTAL HEALTH
OKORO, AGNES A - SCI
POLCHLOPEK, CHRISTOPHER - EMS
RILEY, PATRICK W - FMS
SCHUEREN, BARBARA A. - NURSING
SINDOWSKI, THOMAS P. - RESEARCH
SUTTON, MALLORY I. - EMS
TORTORICE, KATHRYN L. - PBM
VELARDE, VICTOR M - SURGERY
WRIGHT, HOLLY - MENTAL HEALTH
WROBEL, MICHAEL - PBM
ZAMORA, MICHELLE - NURSING

20 Years

BIRCHARD, CHARLES F - EDUCATION

BOR-BROWN, ANITA - DIRECTOR'S OFFC
BURKS, JUAN L. - EMS
CHOMER, YVONNE - REHAB
CRUZ, MARUJA - NURSING
DEAN, LARRY - A & M MGT
DLOTKOWSKI, DOROTHY C. - PAS
FALK, PETRA I. - SURGERY
GARDELLA, LYNN - RESEARCH
GOLDEN, LILLIE - NUTRTN & FOOD
GUY, PATRICIA A - EMS
HARRIS, III, JERRY PHARMACY
HINZ, LINDA A. - SURGERY
KERNAN-SCHROEDER, DIA - NURSING
LAWRENCE, RALPH - CANTEEN
MICHELSON, ANDREA L. - NURSING
MURDOCK, PATRICK A - MEDICINE
OBUCHKOWSKI, MICHAEL J. - RESEARCH
REED, JOYCE D. - NUTRT & FOOD
RINGOLD, DARRIS - POLICE
ROBERTS, ANDREA - PAS
RUSSELL, DORELLA - PAS
SAMATA, KRIST N. - MENTAL HEALTH
SMITH, SHEILA A. - MEDICINE
STIPANOVICH, ROSALYN J. - SURGERY
SULLIVAN, BRIAN R - SURGERY
THORNTON, MADELINE E - RESEARCH
TODD, EDWARD B. - LOGISTICS
WIRTJES, CHRISTOPHER - PAS
WOLF, WILLIAM - RESEARCH

25 Years

ABELEDA, LOURDES D. - MEDICINE
ANDERSON, DERRICK T - NUTRTN & FOOD
BELCHER, GWENDOLYN YVETTE - FISCAL
BURRELL, MICHAEL - MEDICINE
COBUZZI, LOUIS E. - PBM
DAVIS, EDMUND W. - MEDICINE
DEAN, DEBORAH - REHABILITATION
DUFFY, YOLANDA S - PCS SURG/PSYCH
DUNSON, DEBRA D - NUTRTN & FOOD
FAVOR, SARA M - SURGERY
GALLICHIO, ELIZABETH - MENTAL HEALTH
HAVEY, ROBERT M. - RESEARCH
HEISER, PATRICIA L - FISCAL
JANKOWSKI, JOYCE M - PHARMACY
JOHNSON, DOUGLAS R - NUTRTN & FOOD
JOHNSON, JR., WILLIAM R - READJ COUNS
KACHLIC, TED - FMS
KOLBE, CARY - POLICE
LEES, DONALD - PBM
LENZ, STEVEN S - PHARMACY
MANGUBA, LOUELLA R - SURGERY
MAXWELL, RUTH A. - NURSING

MCGHEE, JOHN J - A & M MGT
MCKENZIE, SONDRAL - NUTRTN & FOOD
MCMAHON, MICHAEL J - FMS
MOST, WILLIAM D - REHAB
NIGRO, MARJORY - PAS
ODONNELL, KATHLEEN B - MENTAL HEALTH
RAICH, SUSAN M. - REHAB
SAHTOUT, AMIN M - PAS
SCHWEITZER, CHARLES P - FMS
THOMAS, MELVIN - NUTRTN & FOOD
TONEY, DEDRA - PAS
TORPHY, LISA D - PBM
WALTER, JAMES - RESEARCH
WASHINGTON, GARY - SURGERY
WOODARD, JACQUELINE - NUTRTN & FOOD
WRIGHT, GLORIA A - A & M MGT

30 Years

CAMPBELL, ROBERT H - MENTAL HEALTH
COULTER, DEBORAH L - PBM
ESCUETA, ELSIE S - PCS MEDICINE
FALAJLO, IVANA - SURGERY
FLETCHER, STEVEN J. - IMAGING
FRANKLIN-BLACK, LINDA F - IMAGING
HALM, MICHAEL A - FMS
HEAGS, MALCOLM - EMS
KELSCH, ROGER A - REHAB
KONIECKI, LAWRENCE L. - FMS
LLOYD, IVY D - MENTAL HEALTH
MARKS, FRANK W - PHARMACY
OBODZINSKI, MARY L. - LOGISTICS
SCOTT, DARRYL - A & M MGT
STELMACK, JOAN P - REHAB
STEWART, CATHERINE M - PCS SURG/PSYCH
STINSON, MATTHEWS S. - EMS
SZCZECINSKI, SANDRA T - LT & EXT CARE
WAITKUS, VERONICA - NURSING
WEAVER, FRANCES M. - RESEARCH

35 Years

DORDAIN, LAWRENCE R - DIRECTOR'S OFFC
JONES, CORNELIA - MEDICINE
KWILAS, PHILIP W - DENTAL
LINNERUD, PATRICIA - RESEARCH
TRAVIS, RAYMOND C - PATH & LAB

40 Years

BYRNE, RAYMOND J - PHARMACY
HOPKINS, ANTHONY - NURSING
LEE, BENJAMIN - NUTRTN & FOOD



Volunteers Give Back to Our Nation's Heroes

By VA News

A reassuring pat on the shoulder, a smile that comes from the heart — thank goodness some things never change about the VA Voluntary Service (VAVS). Volunteers continue to support Veterans through many avenues of service, through donations, and by helping to enhance VA health care delivery at health care settings across the country.

You, too, can help as a volunteer, and spring into action to give back to the men and women who served in harm's way to protect and defend us. Just imagine the possibilities of continuing the tradition of "serving those who have served" — it's a win-win that improves the quality of life of both Veteran patients and the volunteers.

Have you visited your local VA health care facility yet? There are many VA health care settings to volunteer. To find your nearest facility, visit: <http://www.va.gov/directory/guide/home.asp>.

VA operates more than 1,700 points of care, including 150 medical centers, 820 community-based outpatient clinics, 300 Vet Centers, 135 community living centers, 104 domiciliary rehabilitation treatment programs, and 70 mobile Vet Centers.

Are you considering setting up visits to hospitalized Veterans? Are you interested in helping with group activities? A variety of opportunities exist at VA facilities, which you may find fun and rewarding.

Perhaps you want to provide support to VAWS Welcome Home events for returning military service members and their

families, who will need important guidance about how to access health care and other benefits through VA.

What about applying your time and efforts to programs and initiatives designed to help homeless Veterans live as self-sufficiently and independently as possible? VA provides hands-on assistance directly to homeless persons. VA's major homeless-specific programs for Veterans and their dependents constitute the largest integrated network of treatment and assistance services in the country.

Another option is to become a VA volunteer to help the National Cemetery Administration with its activities. Your assistance at these final resting places, the national cemeteries, is a way to honor our Veterans and their families.

SEE "VOLUNTEERS" ON PAGE 14

WORD ON THE STREET

What is your favorite summer pasttime?



Fishing, grilling outside, and walking out in nature.

-Michael Wheet
Veteran



Running!

-Tanya Hellams
Education Service



Attending family cookouts. I love going from house to house.

-Curtis Ward
PAS



Playing with bubbles and the water table outside with my two-year-old.

-Mandy Kalins
Social Work Service



Barbecues and watching baseball!

-Ryan Jastromb
Surgery Service



Sailing!

-Donald Lynx
Pharmacy Service



Traveling to India every summer for three weeks.

-Brahmjit Raghav
Radiology



Walking on the beach.

-Maggie Ross
Nursing

Hines Back in the Day



Cart and Supply Cabinets (Hines VAH Photo Archives)

Online Course Helps Vets Overcome Life's Problems

by Tom Cramer
VA Staff Writer

Should I buy a new car or put that money toward college courses? Should I move to Nebraska to take that new job or stay put and look for something here?

Facing a major life decision and feeling overwhelmed? If so, there's now an online program designed specifically to help Veterans and Servicemembers, like you, productively and proactively face difficult life choices.

An online self-help training program called Moving Forward provides tools, videos and interactive quizzes to teach skills that will enable you to better address problems and daily dilemmas that may arise. Developed by the Departments of Defense (DOD) and Veterans Affairs (VA), the site is tailored specifically for Veterans, Servicemembers and their families because it recognizes the uniqueness of military culture.

"The Moving Forward training program is based on a highly-effective cognitive behavior treatment program that

has been successful with Veterans and Servicemembers across the country," said Dr. Ken Weingardt, VA's National Director for Mental Health Web Services. "It teaches skills for overcoming life problems. Its goals are to improve optimism, reduce stress, improve the ability to manage emotions, reduce avoidance and teach thoughtful problem solving skills."

The interactive training course has eight modules that progressively teach methods that can be used to solve many different problems including transitioning back to civilian life, maintaining good relationships with family and friends, dealing with difficult memories from deployment, handling financial responsibilities and more.

Moving Forward is free, confidential and self-paced so you can progress through the modules anonymously at your convenience.

"The site allows the visitor to take a break from the training and return when they are ready," Weingardt explained. "It helps them better understand their own problem-solving abilities and teaches new

SEE "ONLINE" ON PAGE 17

ORGANIZATIONAL HEALTH COMMITTEE



The goal of the Organizational Health Committee is to become the Employer of Choice by:

- Expanding the pool of qualified candidates who value the same philosophy of Veteran centered care
- Providing employees the resources to perform their jobs in an excellent environment
- Investing in employee development and employee recognition in a cost effective manner

All Employee Picnic!
Tuesday, August 12th

Mark your calendars!
More information to come!

Sponsored by the Organizational Health Committee!

Committee Chairs:
Estella Guerrero
Paula Roychaudhuri
Renita Howard

HINES "MONTH IN REVIEW" PHOTOS



Hines staff, Veterans and visitors shopped the Hines Farmer's Market on its opening day on June 19.



Guests toured the new Hines operating rooms during an open house on June 10.



Race car driver Jake Blake visited Veterans at the Hines Blind Rehabilitation Center on June 25.



Hines staff and the Mobile Medical Unit attended the Chicago Pride Parade on June 29.



Hines staff participated in Red, White and Blue Day at Hines on June 13 in observance of Flag Day.



Hines employees posed for a group photo after receiving their federal service certificates and pins in a ceremony on June 17.

Hines Trains Staff in Healing Touch Therapy



Mary Terese Squeo, a Hines recreation therapist, demonstrates Healing Touch techniques during recent Healing Touch training at Hines. (Photo by Lisa Wells)

By Lisa Wells, Recreation Therapist
Hines VAH Recreation Therapy

Edward Hines, Jr. VA Hospital staff are being trained in a bio-field therapy called Healing Touch, which is an energy-based approach to health and healing that makes use of the magnetic field around the body. It can assist in stress reduction, pain management, and wound healing.

Hines began training staff in Healing Touch three years ago as part of the national initiative to incorporate complementary medicine and alternative treatments into the VA.

The training program has five levels.

Since 2011, Hines has trained 122 employees in Level 1, 39 employees in Level 2, and 26 employees in Level 3. Three Hines employees have completed Level 4 and are working toward Level 5.

Recently, Healing Touch became the first energy-based medicine to achieve accreditation through the National Commission for Certifying Agencies (NCCA), the accrediting body of the Institute for Credentialing Excellence (ICE).

Hines will offer a Level 1 training Sept. 13 and 14. Please contact Hines Recreation Therapy at (708) 202-8387, ext. 22261 or ext. 21450 for further information. Space is limited.

VA Connecting Veterans to Care with Telehealth

By Hans Petersen
VA Staff Writer

In fiscal year 2013, more than 600,000 Veteran patients received some element of their health care via telehealth.

That's 11 percent of the Veterans in the VA health care system who participated in 1.7 million telehealth episodes of care.

For those thousands of Veterans, the future is now with telehealth, a radically different way for patients to receive and clinicians to provide care.

According to Dr. Adam Darkins, "telehealth in VA is the forerunner of a wider vision, one in which the relationship between patients and the health care system will dramatically change with the full realization of the 'connected patient'. The high levels of patient satisfaction with telehealth and positive clinical outcome, attest to this direction being the right one."

Darkins is VA's chief consultant for telehealth services.

Telehealth is aimed at making care convenient, accessible and patient-centered. Telehealth helps Veterans live independently in their own homes and local communities.

Covers Over 44 Clinical Specialties

A key component of VA Telehealth is Clinical Video Telehealth, real-time video consultation that covers over 44 clinical specialties including: TeleIntensive Care, TeleMental Health, TeleCardiology, TeleNeurology, TeleSurgery, Women's Telehealth, TelePrimary Care, TeleSCI Care, TeleAmputation Care, TeleAudiol-



ogy, TeleSpeech, Remote Nursing Home Consultation, TelePathology and more.

Home Telehealth, which provided care for 144,520 Veterans in fiscal year 2013, helps patients with chronic conditions in their homes, providing non-institutional care, chronic care management, acute care management, health promotion and disease prevention.

Forty-five percent of these patients live in rural areas and may otherwise have had limited access to VA health care. The number of Veterans receiving care via VA Telehealth services is growing approximately 22 percent annually
More Than a Million Mental Health Encounters

TeleMental Health — VA has delivered more than 1.1 million patient encounters from 150 VA facilities to 729 community based outpatient clinics, a 24-fold increase in consultations since fiscal year 2003.

In fiscal year 2013, VA delivered more than 278,000 TeleMental Health patient encounters to over 91,000 patients.

The scope of VA's TeleMental Health services includes all mental health conditions with a focus on posttraumatic stress disorder, depression, compensation and pension exams, bipolar disorder, behavioral pain and evidence-based psychotherapy.

The ability to receive and store clinical images via telehealth is called Store-and-

SEE "TELEHEALTH" ON PG 17

EMPLOYEE SPOTLIGHT!

Welcome to Hines!

- Mallory Fowler, Pharmacy
Khaliah Frayzier, Medicine
Rishi Garg, Neurology
Roman Gizycki, Pharmacy
Brian Gomoll, Mental Health
Fatma Haiderzad, Education
Candice Harris, PAS
Cordell Harris, Nursing
Dwana Harris, Nursing
Walter Harris, Jr., Nutr & Food
Lynn Hanson, Chaplain
Donald Hooks, Rehabilitation
Peter Hountras, Medicine
Paul Ivy, Jr., EMS
Molly Johnson, Path & Lab Med
Tobias Kaemmerer, Mental Health
Regina Kayse, Medicine
Michelle Kopycinski, Path&Lab Med
Brian Larsen, Surgery
Ryan Lewan, Pharmacy
Tessa Leyson, Nursing
Stephanie LoSavio, Mental Health
Angelo Malamis, Imaging
Stoyan Mantchev, Nursing
Efrem McAdoo, Medicine
Kaitlin McArdle, Pharmacy
Daniel McLernon, FMS
Martin Metoyer, EMS
Mary Morales, Nursing
Sigmund Morris, Nursing
Kristine Nicoletto, Medicine
Marie Ostrowski, Prosthetics
Timothy Ozga, Imaging
Andrea Pahomi, Path&Lab Med
Ambrose Panico, Medicine
Eugene Peppers, EMS
Joseph Posluszny, Surgery
John Pullen, EMS

- Diane Pyzik, PAS
Alyssa Regnier, Nursing
Joseph Ringelstein, Imaging
Cendrine Robinson, Mental Health
Diamond Robinson, Nursing
Meriano Robles, Nursing
Kushal Shah, Pharmacy
Mark Silvestri, Mental Health
Francesca Simeon, Nursing
Rachel Simonetti, Nursing
Barbara Sparks-Buckner, PAS
Robert Squires, FMS
Christopher Staehlin, Pharmacy
Samantha Stewart, Nursing
Akeya Stovall, Nursing
Judy Sungvroom, Pharmacy
Cynthia Surles, Director's Office
Claire Swiontek, Education
Susan Thomas-Tharakan, Nursing
Tiffany Tucker, Nursing
Angela Tylka, Surgery
Yesenia Vazquez, Path&Lab Med
Vanessa Viernzeza, Path&Lab Med
Tierra Watson, Nursing
Amber Weinmann, Imaging
Heather Wenzel, PAS
Terron Wilson, Nursing

Farewell Retirees!

- Elizabeth Amurao, Surgery
Morris Fisher, Neurology
Diana Grysbeck, Mental Health
Cleotha Jackson, EMS
Louella Manguba, Surgery
James McClinton, EMS

- Gerald Moody, EMS
Wladyslawa Omiotek, EMS
Alfonzo Robinson, EMS
June Sanders, SCI
Oranuch Wichacheewa, Surgery

Hines Safety Spotlight: The Heartbeat of Workplace & Patient Safety



Know the Facts

What makes hospitals such hazardous workplaces?

Unique risks:

Hospital workers lift, reposition, and transfer patients who have limited mobility. Other unique risks include needlesticks and violence.

Unique culture:

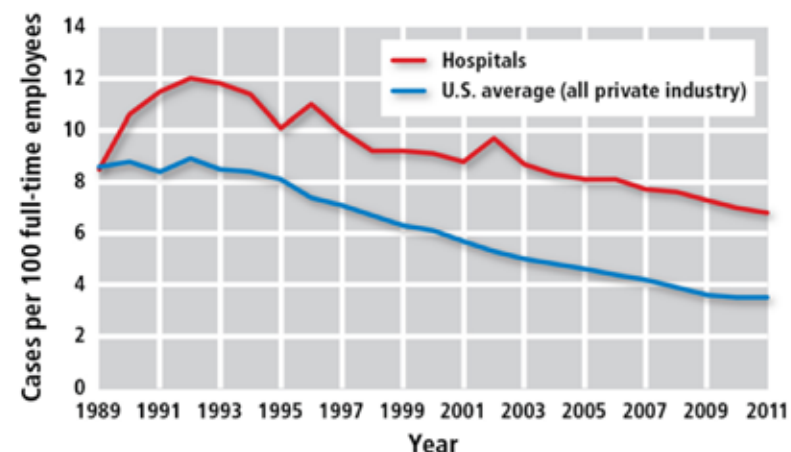
Caregivers feel an ethical duty to "do no harm" to patients. Some will put their own safety and health at risk to help a patient.

They are not assembly lines:

Employees must react to unpredictable events with split-second decisions.

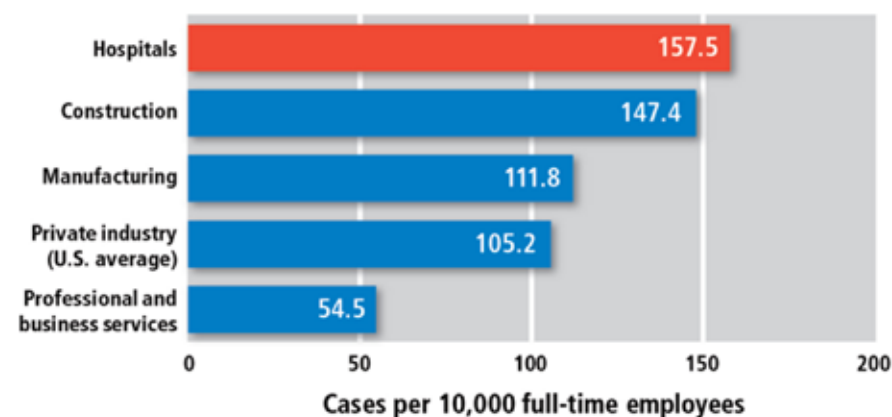
Did you know that a hospital is one of the most hazardous places to work? On average, U.S. hospitals recorded 6.8 work-related injuries and illnesses for every 100 full-time employees in 2011. That is almost twice the rate for private industry as a whole.

Injury and Illness Rates, 1989–2011



Data source: Bureau of Labor Statistics

In 2011, U.S. hospitals recorded 58,860 work-related injuries and illnesses that caused employees to miss work.¹ In terms of lost-time case rates, it is more hazardous to work in a hospital than in construction or manufacturing. "Days away from work" include only the more severe injuries, and they do not account for injuries where an employee continues to work, but on modified duty. Thus, the problem is even larger than the graph below suggests.



Data source: Bureau of Labor Statistics

If you see a near miss/unsafe situation, please report it via the:



Workplace
Accident
Prevention Report



Patient Event
Reporting
System

HINES Farmer's Market

Every Thursday through September 11th!
7 a.m. - 1 p.m.
in the courtyard in front of
Buildings 12 & 13!

"BRAIN" CONTINUED FROM PG 4

ed that patients with PTSD would have greater concerns of mistakes and greater brain reactions to making mistakes, as evidenced by ERN.

Study involved 34 Veterans

Thirty-four Iraq and Afghanistan Veterans from the Ann Arbor Healthcare System were recruited for the study. While all 34 had experienced combat trauma, only 16 met the diagnosing criteria for PTSD. Another 16 presumably healthy participants without any history of trauma were recruited locally. The participants took a version of the Eriksen flanker task, a simple, timed conflict test involving lines of arrows. In some instances, the arrows would all point in the same direction. In others, they would appear at random which makes it harder to perform and increases the likelihood of making mistakes.

The participants were asked to click on either the left or right mouse button, depending on which direction the arrows faced. Throughout the test, the Veterans were monitored by an electroencephalographic (EEG) recording device.

"We expected to see higher ERN magnitude among patients with PTSD," said Phan, "but were surprised to not observe this. In fact, the PTSD group scored very similarly with the healthy group."

This, according to Phan, is actually good news.

"It means individuals with PTSD are still able to generate healthy signals for errors in their brains, which may help them

not make the same mistakes over and over again."

What did come as a surprise to Phan were the EEG measures in the 18 combat-exposed Veterans who did not have PTSD. In comparison to both the PTSD and healthy groups, the combat-exposed group displayed blunted error signals. In other words, they had lower-than-normal ERN intensity.

Future therapy goal: 'Reduce the error signals'

The study, which was published in the July 30, 2013, edition of *Psychiatry Research: Neuroimaging*, suggests that for some people, having a less active error-monitoring system could make them more resilient to developing PTSD from combat trauma.

"We know all the participants had combat trauma exposure, but many came back unscathed at the time of our data collection," says Phan. "Perhaps not being so sensitive to errors in your environment is actually protective. It might allow for the reduction of PTSD and anxiety disorders."

While his study results need to be confirmed through further testing, he hopes one day scientists will learn how to therapeutically manipulate the ERN system for patients' benefit: "If we can reduce the error signals, then maybe we can reduce PTSD," says Phan, who is quick to point out that he's looking years into the future. "First we need to replicate what we saw, but this gives us something to track."

"VOLUNTEERS" CONT. FROM PG 7

Maybe you're thinking about assisting with the Veterans Transportation Network? Since 1987, VA has partnered with veterans service organizations to provide transportation for Veterans. This network was established for Veterans seeking services from a VA facility. VTN guidelines permit volunteers to provide transportation to Veterans using a volunteer's privately-owned or a government-owned vehicle, including donated vehicles, county vehicles, DAV department (state) or chapter (local) vehicles, public transportation and contracted transportation.

When you decide to serve our Veterans with your time and talents, contact your local medical center or community based outpatient clinic for more information, or visit the VA Voluntary Service website at <http://www.volunteer.va.gov/>. There you can complete the Volunteer Now! form, an introductory application in which you can specify your preferences and availability in the comments field.

You are also welcome to make a donation. VA medical centers and hospitals have begun accepting donations online via a major credit card or direct debit. To donate online, visit www.volunteer.va.gov/apps/VolunteerNow, select a state and medical center, and then click "Donate Online." All of your donation will go toward supporting Veterans, and you can choose which fund your money will support.

e-Donate!

E-Donate is an online donation option at <http://www.hines.va.gov> that provides community members who wish to give back to Veterans at the hospital a simple and safe way to pledge their support to the fund of their choice.

For additional information, contact Hines Voluntary Service at (708) 202-2523.





WHAT'S NEW IN CONSTRUCTION?

Completed Projects

PROJECT

Construct smoking shelter, Building 217
Replace transformer by F-lobby

COMPLETION DATE

June 2014
June 2014

Current Projects

PROJECT

Renovate hospital front entrance
Renovate operating room
North Parking Lot B and SCI Parking Lot repaving
Construct E85 filling station
Renovate PAS and Emergency Preparedness, Building 1

ESTIMATED COMPLETION DATE

Fall 2014
Summer 2014
Fall 2014
August 2014
July 2015

Upcoming Projects

PROJECT

Renovate Building 228, Mental Health
Repair and insulate Building 200 exterior (Façade replacement)

ESTIMATED START DATE

December 2014
December 2014

* Denotes construction complete but activation/opening still pending.

Where's the Hines Mobile Medical Unit?

Aurora, Ill.

July 1, 2014
750 Shoreline Drive
a.m. - 2 p.m.

Kankakee, Ill.

July 2, 2014
Parking lot at the corner of Court and Schuyler
9 a.m. - 1 p.m.

Morris, Ill.

July 7, 2014
212 W. Washington Street
9 a.m. - 2 p.m.

St. Charles, Ill.

July 8, 2014
311 N. Second Street
9 a.m. - 2 p.m.

Diamond, Ill.

July 21, 2014
1752 E. Division Street
9 a.m. - 2 p.m.

Hampshire, Ill.

July 25, 2014
995 S. State Street
9 a.m. - 2 p.m.

Pontiac, Ill.

July 28, 2014
110 W. Water Street
9 a.m. - 2 p.m.



To schedule the Hines Mobile Medical Unit for a Veteran-focused event, contact Cris Mabrito, Hines Outreach Coordinator, at (708) 202-8387 ext. 20011 or email her at cris.mabrito@va.gov.

DID YOU KNOW?

The National Veterans Wheelchair Games (NVWG) is a sports and rehabilitation program for military service veterans who use wheelchairs for sports competition due to spinal cord injuries, amputations or certain neurological problems.

Attracting more than 500 athletes each year, the NVWG is the largest annual wheelchair sports event in the world. This year's event is scheduled for August 12-17 in Philadelphia, Pa. Admission is free. The public is most welcome.

The presenters of this event are committed to improving the quality of life for veterans with disabilities and fostering better health through sports competition. While past Games have produced a number of national and world-class champions, the Games also provide opportunities for newly-disabled veterans to gain sports skills and be exposed to other wheelchair athletes. Typically, one quarter of the competitors have never before participated in any type of organized wheelchair sports competition.

Competitive events at the National Veterans Wheelchair Games include air guns, archery, basketball, bowling, field events, hand cycling, a motorized wheelchair rally, nine-ball, power soccer, quad rugby, slalom, softball, swimming, table tennis, track, trapshooting and weightlifting. Athletes compete in all events against others with similar athletic ability, competitive experience or age.

NATIONAL VETERANS WHEELCHAIR GAMES



Volunteers Needed!

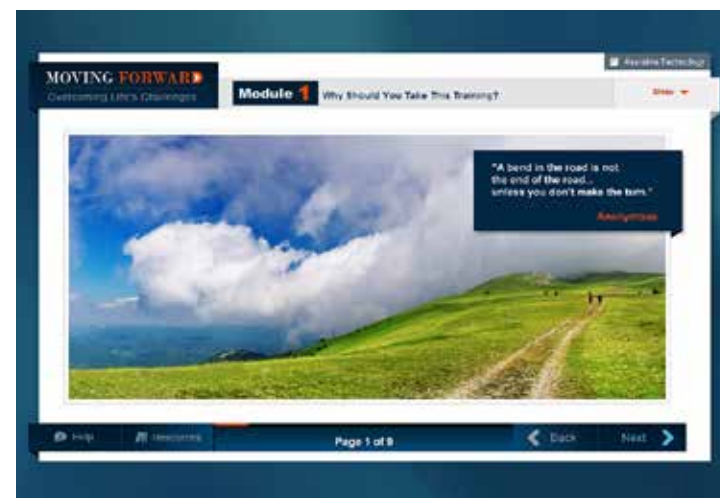


If you are going to be in or around Philadelphia, August 12 - 17, 2014, a great experience awaits you!

It will take more than 2500 volunteers to make this week a success. Our Veterans need you! There are many opportunities ranging from sporting events, greeters and assistance at the airport and dozens of other critical jobs to make the event run smoothly.

The minimum volunteer age is 14 years old. However, individuals younger than 14 can join the "fans in the stands" and cheer on our athletes to victory. For more information about volunteer opportunities, please contact: NVWGPhillyVolunteer@va.gov





Moving Forward Website

“ONLINE” CONTINUED FROM PG 8

skills to overcome obstacles you face in pursuing goals.

“The training program,” he added, “features personal stories, video exercises, surveys and resources to help the user understand the importance of developing an optimistic and creative approach to managing problems.”

In addition to online self-help training program, a companion mobile app for Moving Forward is currently available in the iTunes App Store (unfortunately, an Android version is not available), will provide quick, streamlined access to the tools and skills of the web course.

For more information about Moving Forward contact the VA’s Mental Health Web Services team at movingforward@va.gov.



“TELEHEALTH” CONTINUED FROM PG 11

Forward Telehealth (SFT). This affected 311,369 Veterans in fiscal year 2013. It enables the acquisition of clinical images at sites close to the patient, and for the interpretation and reporting of these to occur remotely and asynchronously.

Use of TeleDermatology up by 279 percent

Currently the major areas of SFT care in VA are TeleRetinal Imaging, to screen for diabetic eye disease and prevent avoidable blindness, and TeleDermatology, which has increased by 279 percent over the past three years to more than 45,000 patients receiving care in fiscal year 2013.

New programs under development include TelePathology, TeleWound care, TeleSpirometry and TeleCardiology.

Dr. Darkins adds, “telehealth is often described as helping provide the right care in the right place at the right time which translates into many Veterans receiving care in their own home and local community. In doing so, telehealth often avoids the need to travel, but can also alert VA that a patient needs to be rapidly seen in the clinic or hospital.”

Hines CBOCs

Hines currently operates six Community Based Outpatient Clinics (CBOCs), which are local, outpatient primary care clinics, to make access to healthcare easier. The clinics offer a variety of services including women’s healthcare, laboratory services, retinal imaging, pharmacy and nutrition consultations, home-based primary care, group health education and mental health services. Some locations offer specialty care to include audiology assessments and hearing aid repair, physical therapy and rehabilitation, as well as geriatric care.

Aurora CBOC

161 South Lincolnway
North Aurora, IL 60542
Phone: 630-859-2504

Elgin CBOC

450 W. Dundee Rd.
Elgin, IL 60123
Phone: 847-742-5920
Fax: 847-742-6124

Joliet CBOC

1201 Eagle St
Joliet, IL 60432
Phone: 815-740-8100
Fax: 815-740-8101

Kankakee CBOC

581 William Latham Drive, Suite 301
Bourbonnais, IL 60914-2435
Phone: 815-932-3823
Fax: 815-932-3827

LaSalle CBOC

4461 N Progress Blvd
Peru, IL 61354
Phone: 815-223-9678
Fax: 815-223-9683

Oak Lawn CBOC

10201 S. Cicero
Oak Lawn, IL 60453
Phone: 708-499-3675
Fax: 708-499-3715

Upcoming Events and Observances

June 2014

National Safety Month
Vision Research Month
Lesbian, Gay, Bisexual & Transgender Pride Month

Professional Wellness Month
Catarac Awareness Month
National Scleroderma Awareness Month

1	Heimlich Maneuver Introduced (1974)	15	Father’s Day
1	National Cancer Survivors Day	21	Summer Begins
1-7	National Headache Awareness Week	21	Battle of Okinawa Ended (1945)
5	World Environment Day	22	GI Bill Signed into Law (1944)
6	D-Day Anniversary (1944)	25	Korean War Began (1950)
9-15	Men’s Health Week	26	United Nations Charter Signed (1945)
14	U.S. Army Established (1775)	27	National HIV Testing Day
14	Flag Day		

July 2014

UV Safety Month
Herbal/Rx Interaction Awareness Month

Eye Injury Prevention Month
Bioterrorism/Disaster Education Month

1	IRS Established (1862)	16	First Atomic Bomb Tested (1945)
1	Medicare Anniversary (1968)	21	Veterans Administration Created (1930)
2	U.S. Constitution Takes Effect (1788)	21-27	National Hospitality House Week
2	Civil Rights Act (1964)	26	Americans with Disabilities Act Day (1990)
2	Army Air Corps Established (1926)	26	Department of Defense Created (1947)
4	Independence Day	27	U.S. State Department Founded (1789)
6	Air Force Cross Created (1960)	27	Korean War Armistice (1953)
6-12	National Therapeutic Recreation Week	28	World War I Began (1914)

August 2014

Neurosurgery Outreach Month
National Immunization Awareness Month
Spinal Muscular Atrophy Awareness Month

Psoriasis Awareness Month
MedicAlert Month

1	National Minority Donor Awareness Day	10-16	National Health Center Week
1	World Wide Web Anniversary (1990)	12-17	National Veterans Wheelchair Games
3-9	Assistance Dog Week	14	Navajo Code Talkers Day
4	Coast Guard Day (1790)	19	National Aviation Day
6	Atomic Bomb Dropped on Hiroshima (1945)	22	Vietnam Conflict Began (1945)
7	Purple Heart Day (1782)	26	Women’s Equality Day
7	U.S. War Department Established (1789)	28	March on Washington (1963)
7	Operation Desert Shield Began (1990)	29	Hurricane Katrina Struck Gulf Coast (2005)
9	Atomic Bomb Dropped on Nagasaki (1945)		



DEPARTMENT	BUILDING	FLOOR/ROOM
Admissions	200	1st Floor
Audiology	228	1112
Auditorium	9	1st Floor
Blind Rehabilitation Center	113	1st Floor
Cafeteria	45	1st Floor
Chapel	200	C101
Compensated Work Therapy	13	3rd Floor
Compensation and Pension	12	2nd Floor
Credit Union	1	A133
Dental Clinic	200	12th Floor
Diabetes Clinic	200	4th Floor
Dialysis Clinic	200	6th Floor
Emergency Department	200	1st Floor
ENT Clinic	228	1112
Extended Care Center	217	1st Floor
Eye Clinic	200	A153
Eye Diagnostic Lab	200	C129
GU Clinic	200	B020
Geriatric Outpatient Clinic	217	1st Floor
Human Resources	17	1st Floor
Imaging (CT Scan, MRI, Ultrasound)	200	C105
Laboratory/Blood Draw	200	D110
Lost and Found	200	A126
Mental Health Outpatient Clinics	228	1st - 4th Floor
Mental Health Outpatient Clinics	13	All Floors
Non-VA Medical Care	9	101
Nuclear Medicine	1	G201
OEF/OIF/OND Program	228	1029
Optical Clinic	228	1051
Patient Advocate Office	228	1055
Patient Education Resource Center	1	G100
Patient Financial Services	1	E131
Pharmacy	200	B128
Post Office	45	Atrium
Prosthetics	228	5th Floor
Radiation Therapy	200	Basement
Rehabilitation Therapy Clinics	228	Basement
Reproduction	1	C126A
Residential Care Facility	221	1st Floor
Spinal Cord Injury/Disorder Clinic	128	1st Floor
Sub-specialty Outpatient Clinics	200	4th Floor
Surgical Outpatient Clinics	200	5th Floor
Voluntary Service	9	1st Floor
Women's Health Center	200	12th Floor
X-ray	200	D101A